

BEST AVAILABLE COPY

ISSUE SLIP STATE & AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	XO	108112	
O.I.P.E. CLASSIFIER		19	7/10/91
FORMALITY REVIEW		69853	7/10/91

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 — (Through numeral) Canceled A Appeal
 ÷ Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	9-22-2003
2	✓	✓	6-26-2003
3	✓	✓	10-20-2003
4	✓	✓	7-20-04
5	✓	✓	
6	✓	✓	
7	✓	✓	
8	✓	✓	
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
stap additional sheet here

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